

EXHIBIT 1

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Claim Number	Loss Date	Date of Service	Procedure Code - Description	Units	Billed Amount	Rendering Provider NPI
050463818-0001	8/8/2022	9/1/2022	95851-RANGE OF MOTION MEASUREM	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	95851-RANGE OF MOTION MEASUREM	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	95851-RANGE OF MOTION MEASUREM	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	95851-RANGE OF MOTION MEASUREM	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	95851-RANGE OF MOTION MEASUREM	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	95851-RANGE OF MOTION MEASUREM	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	95851-RANGE OF MOTION MEASUREM	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	95851-RANGE OF MOTION MEASUREM	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	95851-RANGE OF MOTION MEASUREM	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	95851-RANGE OF MOTION MEASUREM	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	95851-RANGE OF MOTION MEASUREM	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	97799-UNLISTED PHYSCL MED/REHA	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	97799-UNLISTED PHYSCL MED/REHA	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	97799-UNLISTED PHYSCL MED/REHA	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	97799-UNLISTED PHYSCL MED/REHA	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	97799-UNLISTED PHYSCL MED/REHA	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	97799-UNLISTED PHYSCL MED/REHA	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	97799-UNLISTED PHYSCL MED/REHA	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	97799-UNLISTED PHYSCL MED/REHA	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	97799-UNLISTED PHYSCL MED/REHA	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	97799-UNLISTED PHYSCL MED/REHA	1 \$	300.00	1326698655
050463818-0001	8/8/2022	9/1/2022	97799-UNLISTED PHYSCL MED/REHA	1 \$	300.00	1326698655
036635263-0001	12/10/2017	7/6/2022	95811-POLYSOM 6/>YRS CPAP 4/>	1 \$	300.00	1306967310

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Claim Number	Loss Date	Date of Service	Procedure Code - Description	Units	Billed Amount	Rendering Provider NPI
039413754-0001	3/7/2019	4/25/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	72.83 0	
039413754-0001	3/7/2019	4/25/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	72.83 0	
039413754-0001	3/7/2019	4/25/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	72.83 0	
039413754-0001	3/7/2019	4/25/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	72.83 0	
039413754-0001	3/7/2019	4/25/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	72.83 0	
039413754-0001	3/7/2019	4/25/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	72.83 0	
039413754-0001	3/7/2019	4/25/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	72.83 0	
039413754-0001	3/7/2019	4/25/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	72.83 0	
039555400-0004	3/26/2019	7/29/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	58.59 1306967310	
039555400-0004	3/26/2019	7/29/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	58.59 1306967310	
039555400-0004	3/26/2019	7/29/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	58.59 1306967310	
039555400-0004	3/26/2019	7/29/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	58.59 1306967310	
039555400-0004	3/26/2019	7/29/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	58.59 1306967310	
039555400-0004	3/26/2019	7/29/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	58.59 1306967310	
039555400-0004	3/26/2019	7/29/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	58.59 1306967310	
039555400-0004	3/26/2019	7/29/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	58.59 1306967310	
039555400-0004	3/26/2019	7/29/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	58.59 1306967310	
039555400-0004	3/26/2019	7/29/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	58.59 1306967310	
039579510-0001	3/29/2019	5/20/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	72.83 0	
039579510-0001	3/29/2019	5/20/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	72.83 0	
039579510-0001	3/29/2019	5/20/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	72.83 0	
039579510-0001	3/29/2019	5/20/2019	95999-UNLISTED NEUROLOGICAL DX	1 \$	72.83 0	

Claim Number	Payment Amount	Check Issue Date	Check Number	Pay From Date	Pay Through Date
044126318	\$ 3,450.00	1/13/2024	60700049	11/22/2020	1/10/2024
	\$ 3,450.00				